

**NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS
AND INTERFERENCES**

In Re Application of Julian N. Nikolchev

Attorney Docket No.: 06701.P002XC4

Application Number 10/600,298

Filed 6/20/2003

For CONTRACEPTIVE TRANSCERVICAL FALLOPIAN TUBE OCCLUSION DEVICES AND METHODS

Group Art Unit: 3772 Examiner: Brown, Michael A.

Address to:

COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, Virginia 22313-1450

Applicant hereby **appeals** to the Board of Patent Appeals and Interferences from the last decision of the examiner.

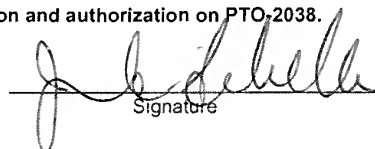
The fee for this Notice of Appeal is (37 CFR 1.17(b)) \$ 540.00.

- ☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ _____
- ☐ A check in the amount of the fee is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.
- ☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 02-2666. I have enclosed a duplicate copy of this sheet.
- ☒ A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.

Warning: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the

- ☐ applicant/inventor.
- ☐ assignee of record of the entire interest
See 37 CFR 3.71, Statement under 37 CFR 3.73(b)
is enclosed. (Form PTO/SB/96)
- ☒ attorney or agent of record.
- ☐ attorney or agent acting under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a) 31,195


Signature

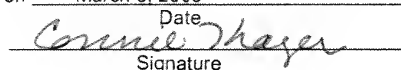
James C. Scheller, Jr.
Typed or printed name

March 3, 2009
Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest of their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on March 3, 2009


Signature

Connie Thayer
Typed or printed name

05/01/03